THONEYCUTT ATTYATLAW

PAGE

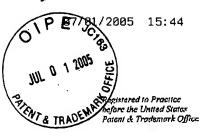
2813797997 PART B - FEE(S) TRANSMUUTAL Complewand send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patcuts P.O. Box 1450 Alexandria, Virginia 22313-1450 JUL 0 1 2005 (703) 746-4000 or Fax INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated trailess corrected splow or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fees will be mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fees will be mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fees will be mailed to the current correspondence address. Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, most have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 23858 7590 04/15/2005 TIMOTHY M HONEYCUTT ATTORNEY AT LAW Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below. P O BOX 1577 CYPRESS, TX 77410 07/05/2005 HDEMESS2 00000068 010365 10676904 HONEYCUTT (Depositor's name) (Signature) 1400.00 DA 01 FC:1501 (Date) APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKST NO. CONFIRMATION NO. 10/01/2003 James F. Buller AMDI:132/HQN 8070 TITLE OF INVENTION: LATERAL DIODE WITH MULTIPLE SPACERS APPLN. TYPE SMALL ENTITY PUBLICATION PEB issue fee TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1400 50 \$1400 07/15/2005 EXAMINER ART UNIT CLASS-SUBCLASS PHAM, THANH Y 2823 257-288000 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list 1 TIMOTHY M. HONEY CUT (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Д "Fcc Address" indication (or "Fcc Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of я Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) ADVANCED MICRO DEVICES, INC. SUNNYVALE, CA Please check the appropriate assignce category or categories (will not be printed on the patent) : 🔲 Individual 🂢 Corporation or other private group entity 🚨 Government 4a. The following fee(s) are enclosed: 4b. Payment of Fee(a): Issue Fee A check in the amount of the fee(s) is enclosed. Dublication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. Advance Order - # of Copies The Director is hereby authorized by charge the required fec(s), or credit any overpayment, to Deposit Account Number 01 - 0365 (enclose an extra copy of this form). 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. Sec 37 CFR 1.27. □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. Authorized Signatur *70*05 HONEYCUT Typed or printed name Registration No.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450.

DO NOT SEND FBES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



TIMOTHY M. HONEYCUTT

Attorney at Law

POST OFFICE BOX 1577 CYPRESS, TX 77410-1577

16607 SAINT JOHNS WOOD DR. TOMBALL, TX 77377 TELEPHONE: (281) 379-7999
PACSIMILE: (281) 379-7997
E-MAIL: timhoney@sprynet.com

FAX COVER SHEET

FAX NUMBER TRANSMITTED TO: (703) 746-4000

To:

MAIL STOP ISSUE FEE

Of:

United States Patent and Trademark Office

From:

Timothy M. Honeycutt

Client/Matter:

10/676,904

(Atty. Dkt. No. AMDI:132\HON)

Date:

July 1, 2005

2
1

COMMENTS:

The above-listed papers are transmitted herewith for filing.

Originals will not follow.

The information contained in this facsimile message is information protected by attorney-client and/or the attorney/work product privilege. It is intended only for the use of the individual named above and the privileges are not waived by virtue of this having been sent by facsimile. If the person actually receiving this facsimile or any other reader of the facsimile is not the named recipient or the employee or agent responsible to deliver it to the named recipient, any use, dissemination, distribution, or copying of the communication is strictly prohibited. If you have received this communication in error, please immediately notify us by telephone and return the original message to us at the above address via U.S. Postal Service.

^{*} NOT COUNTING COVER SHEET. IF YOU DO NOT RECEIVE <u>ALL</u> PAGES, PLEASE TELEPHONE US IMMEDIATELY AT (281) 379-7999.